REQUEST FOR 1	PATENT FE	E REI	FUND	404	
1 Date of Request:	7		atent	40/52	2022
3 Please refund the following fe		4 PA		5 DATE FILED	6 AMOUNT
Filing					\$
Amendment					\$
Extension of Time					\$
Notice of Appeal/Appeal					×\$
Petition					\$
Issue					\$
Cert of Correction/Termina	l Disc.				\$
Maintenance					\$
Assignment					\$
Other					\$
10 REASON:		7 TOTAL AMOUNT OF REFUND			\$
		8 TO BE REFUNDED BY:			
		Treasury Check			
Overpayment			Cr	edit Depo	sit A/C #:
Duplicate Payment			9		
No Fee Due (Explanation):					
					
REFUND REQUESTED BY:					
TYPED/PRINTED NAME:		_	TII	CLE:	
SIGNATURE:		PHONE:			
OFFICE:					
**************************************	**************************************	****			- 11
APPROVED:		DATE	Hdjus 91/31 92 FC	tment Date: 07/0 /2005 DFREY1	1/2005 PKIDWELL 00000/2 180013 105220 .00 CR

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

ORM PTO 1577 (01/90) Office of Finance Refund Branch Crystal Park One, Room 802B